

Nursing Care Quality Assurance Commission

Continuing Competency Sub-committee Meeting
November 15, 2007
7:00 p.m. – 9:00 p.m.
Point Plaza East - 310 Israel Road SE
Tumwater, WA 98504

Minutes

Members: Cheryl Payseno, Chair; Diane Sanders, Judy Personett, Linda Batch, Marianne Williams,

Robert Salas, Susan Woods, Advisory Leaders: Joan Caley, Chuck Cumiskey, Peggy

Currie, Kim Field, Ruth Seignemartin, and Karen Winter.

DOH staff: Paula Meyer, Executive Director and B.J. Noll, Practice Advisor

The meeting was called to order at 7:05 pm.

Members Present: Cheryl, Judy, Linda, Mariann, Robert, Susan, Chuck, Peggy, Kim, Ruth, and Karen and staff.

The October 16, 2007 minutes were approved unanimously with a minor correction. They will be submitted for final adoption/approval during the January 2008 Nursing Commission's business meeting.

I. BUSINESS

a. Cheryl requested revising the agenda to discuss an alternative to the North Carolina model. She found the North Carolina model was not easily transformed to fit Washington State law and its primary competency measurement is centered on continuing education with no requirement for a nurse to be in practice. Cheryl asked the group to consider a more comprehensive model to include evaluating competency for nurses practicing in all settings. She proposed the subcommittee consider calling it the Professional Practice Assessment model.

Cheryl provided revised advisory group charters including a list of deliverables that includes the components necessary to determine competence and establish timelines to meet the goals of the proposed model. She requested the subcommittee present a recommendation to proceed with the Professional Practice Assessment model at the NCQAC business meeting tomorrow.

The meeting participants agreed to implement the enhanced model and discussed the proposal's key components; how the groups will function; and how nurses can best assess their competence: The following was decided:

Professional Practice Assessment, Documentation & Introspection/Self-reflection Advisory Groups

Following discussion about the group charters and deliverables needed to implement the program, the following groups decided to work together: Professional Practice Assessment, Documentation and Introspection/Self-reflection.

Charge of the combined group:

- ♦ To identify accepted methods and acts to assess the current competence of a nurse as a condition of license renewal.
- ♦ To develop tools for nurses to use to asses their current practice and develop a personal practice development plan as evidence of compliance.
- ♦ To determine methods for nurses to engage in meaningful introspection and self-reflection without unreasonable professional risk.
- ♦ To determine documentation requirements for individual nurses to maintain that demonstrate compliance.
- Develop a plan for the Commission to audit compliance.

Cheryl asked the group to determine how often they would review audits and how nurses are selected for audit. The group will provide a list of documents or evidence based information on accepted methods and acts by the February meeting.

Communication with Stakeholders Advisory Group Charge:

◆ To identify stakeholders, develop, and implement a communication strategy to develop and use consistent terms and definitions when communicating with stakeholders.

Cheryl asked the group to develop a glossary of terms to establish consistent terms. This group will identify nurse stakeholders for the January meeting and later on patient, employers, and public stakeholders.

Success Measures Advisory Group

Charge:

◆ To develop and implement a process to establish baseline data from primary stakeholder groups and to collect ongoing data to quantify progress and outcomes of the pilot project.

Karen discussed collecting demographic information from nurses (i.e. age group; nursing career; education level; school/staff development). The group needs to identify potential success measures (factors/aspects to be monitored) to determine the impact Professional Practice Assessment on nurses. Survey methods, including identification of survey participants and sample size, need to be determined. Susan Woods agreed to work with the group on survey methods.

Timeline

The subcommittee discussed the timeline necessary to move the project forward and to prepare for the July Commission newsletter that will be dedicated to Continuing Competency. The subcommittee agreed on the following timeline:

Meeting Date	Deliverable	Group Responsible
Dec 18, 2007	Baseline Nurse Survey draft	Success Measures
Subcommittee		

meeting		
Jan 2008	1. List of accepted methods & acts to	1. Professional Practice
Subcommittee	determined continued competency	
meeting	2. Introspection/Self-Reflection	
	methods/acts	
	3. Nurse Stakeholder groups identified	2. Introspection/Self-reflection
		3. Stakeholders
Feb 2008	1. List of documents/evidence to	1. Documentation
Subcommittee	demonstrate compliance	
meeting	2. Baseline Nurse Survey reviewed	2. Success Measures
Mar 2008	1. Communication strategy for nurse	1. Communication with
Subcommittee	stakeholders	Stakeholders
meeting	2. Baseline Nurse Survey complete	
		2. Success Measures
Mar 2008	Baseline Nurse Survey approval by	Success Measures
Commission	Commission	
Meeting		

Paula commended the subcommittee's work and gave an overview of taskforce progress.

- b. The Advisory Group Leaders will schedule a half day face to face meeting to work on assignment details. (January 7, 2008 in Seattle)
- c. There were no open discussion items.

The next meeting is scheduled for December 18, 2007 from 7:00pm - 9:00pm

The meeting was adjourned at 8:31p.m.

